

NOTES FROM THE MEDICAL PRESS

IN CHARGE OF
ELIZABETH ROBINSON SCOVIL



AN AID TO THE COMFORT OF BEDRIDDEN PATIENTS.—*American Medicine* says that in cases of severe heart disease with orthopnea it is often extremely difficult to keep the patient in the semi-upright position, as the direct pressure on the tuberosities of the ischium is not only uncomfortable, but is conducive to bedsores, and there is also a tendency to slip down in the bed. In such cases a hard bolster is placed under the mattress at the level of the thighs, forming with the pillows a double inclined plane, in the trough of which the back rests. The support and the removal of a part of the weight from the tuber ischii to the fleshy part of the thighs affords great relief to the patient.

A SUBSTITUTE FOR MILK IN INTESTINAL DISEASES OF CHILDREN.—Helprin, in the *Medical Record*, recommends the following, which may be used in place of barley-water when that mixture becomes monotonous or distasteful: "Two tablespoonfuls of ordinary flour in an agate dish retained in an oven till the flour is well browned, then blend or dissolve in a little cold water; this is now gradually added to, and stirred in two pints of water while boiling. This may be given in three-ounce apportionments and ten feedings. One-half drachm, gradually increased to a drachm and a half, of condensed milk can, in the course of a day or two, be judiciously added to each feeding." Other preparations of the same class include cornstarch and granum.

ACUTE RHEUMATISM IN CHILDREN.—The *Journal of the American Medical Association* in a synopsis of an article in the *Post-Graduate* says: "H. B. Sheffield considers rheumatism in children a grave infection, one that requires active treatment particularly in order to prevent serious complications. Rest in bed is the most important therapeutic measure in this direction, and should be enjoined during the entire course of the disease. Dieting he considers to be nothing but a myth. During the febrile stage the diet should, of course, be limited to the ordinary 'fever diet.' In older children he uses the salicylates combined with small doses of pepsin or ingluvin. For younger children he prefers aspirin, or the salicylates obtained from the wintergreen plant, in doses

of five grains, to be repeated every two hours the first day and every four hours the following days. For the relief of articular pain and swelling the joint should be wrapped in absorbent cotton wrung out of a warm saturated solution of bicarbonate of soda. The compress should be covered with oiled silk and a flannel bandage, and changed as soon as it becomes dry. After disappearance of the acute symptoms the stiffness and lameness generally yield to gentle massage with an ointment containing one drachm each of oil of gaultheria and ichthyol in one ounce of lanolin. Later on it is advantageous to supplement the local treatment by gentle general massage. The iodids should not be lost sight of in protracted cases."

REMEDY FOR MOSQUITOES.—Schill in the *Deutsche Medicinische Wochenschrift* advises the application of a paste of bicarbonate of soda to mosquito bites, and says that a concentrated solution may also be used. Wetting exposed parts with a two per cent. solution of thymol will drive the insects away.

A CASE OF SUTURE OF THE HEART, WITH RECOVERY.—The *Medical Record* condenses the report of this case from the *American Journal of the Medical Sciences*: "Francis T. Stewart reports this case. The patient was a colored man, twenty years of age. He was stabbed, the knife having wounded the heart. The writer, after exposing the wound, closed it with a continuous silk suture. Afterwards the pericardial wound was sutured, a small opening being left for a gauze drain. On the thirty-fifth day the patient was allowed out of bed. The writer appends a table of reported cases. The dangers of the drain are the same in these cases as elsewhere—infection and adhesions. Of the twenty-two cases in which the pericardium was drained, two died within a few hours, and of the remaining twenty, ten (fifty per cent.) recovered. Of the fifteen in which the pericardium was closed without drainage one died in fifteen minutes, and of the remaining fourteen seven recovered. The question may still be regarded as an open one. Of the twenty-three cases that recovered after operation, eleven are known to have been complicated with some form of infection. In only one case is uncomplicated recovery stated."

FEEDING AND REST CURE IN TYPHOID.—The *Journal of the American Medical Association* has an abstract of a paper in the *Therapeutic Gazette* as follows: "Hare fails to see any reason that would justify disordering metabolism by the institution of a rigid single diet, and is fully impressed, from personal experience as well as from physiologic facts, with the utter inadequacy of the pure milk diet in the treatment of

typhoid fever. It is his custom to give all patients after the first week of typhoid from one to two soft-boiled eggs a day in addition to the ordinary allowance of milk, and to vary their diet by the use of curds and whey, rice which has been boiled to a pulp, barley, wheat, and oatmeal gruel, and a cup of cornstarch with vanilla or some other flavoring substance of a like character. As a result of this diet he very rarely sees marked ataxia, which is so common a symptom in convalescence in typhoid; and the patient's nutrition is so well preserved that he is but little more emaciated than many cases of acute pneumonia at the time of recovery. Secondary complications like furuncles and bedsores are unknown. He believes that the average case of convalescent typhoid fever is a fair mark for any infection, because the patient is half starved. Recognizing that typhoid fever is characterized by a deficient secretion of digestive juices, all his patients receive hydrochloric acid and pepsin with their proteid foods, and takadiastase and pancreatin when carbohydrates are used. He is utterly opposed to the use of beef-tea, which he believes acts as a first-rate culture medium and frequently increases tympanites and diarrhœa, and the stools become infected under its use. Hare considers that the value of the modern method of treating typhoid by cold depends in great part on the fact that when cold bathing is used the patient, who is undoubtedly suffering from a form of toxæmic neurasthenia, receives a form of rest cure which maintains strength and puts him in first-rate physical condition. The free use of cold water is not the chief factor for good in these cases, but the rubbing or massage which follows these baths is of the very greatest importance, aiding the dissipation of body-heat, readjusting the circulation, and exerting on the patient the beneficial effects which follow the use of massage as seen in the rest-cure treatment of neurasthenia. Therefore he advocates the employment of the Weir Mitchell rest cure in the treatment of typhoid fever. Equally good results can be obtained if these patients are properly sponged, with friction, instead of being plunged. The sponging possesses the additional advantage that the patient does not have to be moved from his bed, that the great muscles of the back can be given more attention than the anterior portion of the body, thereby increasing the dissipation of heat very greatly and preventing the formation of bedsores. Patients with a temperature below 102.5 should be given tepid baths with friction. Since he has been feeding his patients, Hare finds that he is giving them less alcohol than formerly, probably because the patient burns up food products in the body instead of burning up alcohol. He throws out the suggestion that alcohol may act as a stimulant on the functions which are connected with immunity and the ability of the body to resist infection."